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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 |
| | Chapter 11 Chapter 12 |
| | Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|---|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name | David | |
| Write the name that is on | First name | First name |
| your government-issued picture identification (for | Middle name | Middle name |
| example, your driver's | Frazier | _ |
| license or passport | Last name | Last name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the last 8 years | First name | First name |
| Include your married or | Middle name | Middle name |
| maiden names. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of your Social | XXX - XX | xxx - xx- |
| Security number or federal Individual | OR | OR |
| Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

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| De | ebtor 1 David First Name | Hrazier Middle Name Last Nam | | Case number (if known) | |
|--|---|--|--------------------|---|--------------------|
| | ot .va.ne | inidaio riano | | | |
| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Jo | oint Case): |
| 4. | Any business names and Employer | I have not used any business names of | r EINs. | I have not used any business names of | or EINs. |
| Identification Numbers (EIN) you have used in the last | | Business name | | Business name | |
| | 8 years | Business name | | Business name | |
| | Include trade names and doing business as names | EIN | | EIN | |
| | | EIN | | EIN | |
| 5. | Where you live | | | If Debtor 2 lives at a different address: | |
| | | 1031 W Maxwell St Apt 102 Number Street | | Number Street | |
| | | | 0608 | | |
| | | City State Zi | p Code | City State Zi | ip Code |
| | | County If your mailing address is different fro above, fill it in here. Note that the court notices to you at this mailing address. | | County If Debtor 2's mailing address is different fill it in here. Note that the court will send this mailing address. | |
| | | Number Street | | Number Street | |
| | | | | | |
| | | City State | Zip Code | City State | Zip Code |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filling this | s netition. I have | Check one: Over the last 180 days before filing this | s netition. I have |
| | to life for bankruptcy | lived in this district longer than in any c | other district. | lived in this district longer than in any o | other district. |
| | | I have another reason. Explain. (See 28 | U.S.C. 99 1408.) | I have another reason. Explain. (See 28 | 8 U.S.C. 99 1408.) |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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| De | btor 1 David | | | Case number (if kno | wn) |
|----|---|---|---|---|---|
| | First Name | Middle Name I | Last Name | | |
| Pa | rt 2: Tell the Court Abo | ut Your Bankruptcy Case | | | |
| | The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief description Bankruptcy (Form B2010)). Also, g Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | | |
| | How you will pay the fee | more details about how you cashier's check, or money or may pay with a credit card or line to pay the fee in instancial Individuals to Pay Your Filing. I request that my fee be ward judge may, but is not require the official poverty line that | may pay. Typically, if yorder If your attorney is a check with a pre-printer allments. If you choose ag Fee in Installments (Oaived (You may requested to, waive your fee, an applies to your family simust fill out the Application. | ou are paying the submitting your ed address. this option, sign fficial Form 103, this option only d may do so only ze and you are u | the clerk's office in your local court for efee yourself, you may pay with cash, repayment on your behalf, your attorney on and attach the <i>Application for</i> A). If you are filing for Chapter 7. By law, a y if your income is less than 150% of anable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official) |
| | Have you filed for bankruptcy within the last 8 years? | Ves. District District District | When When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District | When When | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| | Do you rent your residence? | ✓ No. Go to line 12. | atement About an Eviction | | you want to stay in your residence? St You (Form 101A) and file it with |

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Frazier Debtor 1 David __ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1 First Name
 David First Name
 Frazier Last Name
 Case number (if known)

| Pa | Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling | | | | | |
|---|---|---|---|----|--|---|
| | | About Debtor 1: | | Ab | out Debtor 2 (Sp | oouse Only in a Joint Case): |
| 15. | Tell the court | You must check one: | | Yo | u must check one: | |
| re al | whether you have received briefing about credit counseling. | counseling agen | ing from an approved credit icy within the 180 days before I ptcy petition, and I received a npletion. | | counseling ager | fing from an approved credit ncy within the 180 days before I uptcy petition, and I received a mpletion. |
| | The law requires that you receive a briefing | | he certificate and the payment plan, veloped with the agency. | | | the certificate and the payment plan, eveloped with the agency. |
| , | about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file. | counseling agen | ing from an approved credit icy within the 180 days before I ptcy petition, but I do not have a inpletion. | | counseling ager | fing from an approved credit ncy within the 180 days before I uptcy petition, but I do not have a mpletion. |
| | | | er you file this bankruptcy petition, opy of the certificate and payment | | | ter you file this bankruptcy petition, copy of the certificate and payment |
| If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your | | from an approve obtain those ser made my reques | ked for credit counseling services d agency, but was unable to vices during the 7 days after I t, and exigent circumstances emporary waiver of the | | from an approve obtain those ser made my reques | ked for credit counseling services ed agency, but was unable to rvices during the 7 days after I st, and exigent circumstances emporary waiver of the |
| (| creditors can begin collection activities again. | requirement, attac efforts you made t unable to obtain it | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were before you filed for bankruptcy, and imstances required you to file this | | requirement, attace efforts you made unable to obtain it | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were t before you filed for bankruptcy, and umstances required you to file this |
| | | | e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy. | | | e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy. |
| | | receive a briefing must file a certifica with a copy of the | fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. | | receive a briefing must file a certification with a copy of the | sfied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. |
| | | | Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of: | | Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. | |
| | | | | | I am not required to receive a briefing about cre counseling because of: | |
| | | Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | | Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. |
| | | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. |
| | | Active duty. | I am currently on active military duty in a military combat zone. | | Active duty. | I am currently on active military duty in a military combat zone. |
| | | about credit coun | are not required to receive a briefing seling, you must file a motion for ounseling with the court. | | about credit cour | are not required to receive a briefing seling, you must file a motion for ounseling with the court. |

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| Debtor 1 David | NO. 1 11 A | Frazier | Case number (if known |) |
|---|---|--|---|--|
| Part 6: Answer These Que | Middle Name estions for Reporting Pu | Last Name | | |
| 16. What kind of debts do you have? | 16a. Are your debts pri "incurred by an incomplete of the prior of th | imarily consumer debts? dividual primarily for a per 16b. 117. imarily business debts? ess or investment or throu 16c. | sonal, family, or housel Business debts are deb ugh the operation of the | ts that you incurred to obtain business or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | Yes. I am filing under (expenses are pa | der Chapter 7. Go to line 18. Chapter 7. Do you estimate id that funds will be available | that after any exempt pro | perty is excluded and administrative ed creditors? |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | ☐ 1,000-5 ☐ 5,001-1 ☐ 10,001- | 0,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$10,000 \$50,000 | 001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? | | \$10,000 \$50,000 | 001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below | | | | |
| For you | correct. If I have chosen to file ur of title 11, United States under Chapter 7. If no attorney represents out this document, I hav I request relief in accordance. | nder Chapter 7, I am awar code. I understand the r s me and I did not pay or a re obtained and read the n ance with the chapter of t | e that I may proceed, if elief available under each agree to pay someone wortice required by 11 U. itle 11, United States C | he information provided is true and eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed tho is not an attorney to help me fill S.C. § 342(b). ode, specified in this petition. money or property by fraud in |
| | connection with a bankn both. 18 U.S.C. §§ 152, | uptcy case can result in fi | | imprisonment for up to 20 years, or |
| | /s/ David Frazier Signature of Debtor 1 | | Signature of I | Debtor 2 |
| | Executed on 7/2 | 28/2017 MM / DD / YYYY | Executed o | |

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| Debtor 1 David | | Frazier | Case number (if I | known) |
|--|----------------------------|-------------------------|---------------------------|---|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed und | er Chapter 7, 11, 12, o | or 13 of title 11, United | ave informed the debtor(s) about d States Code, and have explained the lso certify that I have delivered to the |
| If you are not | debtor(s) the notice requi | red by 11 U.S.C. § 34 | 2(b) and, in a case in v | which § 707(b)(4)(D) applies, certify that I |
| represented by an | . , | | | ules filed with the petition is incorrect. |
| attorney, you do not | • | ' ' | | ' |
| need to file this page. | /s/ Brian Atlas | | Date | 7/28/2017 |
| | Signature of Attorney for | or Debtor | M | M / DD / YYYY |
| | g | | | |
| | | | | |
| | Brian Atlas | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 11101 S. Western Aver | nue | | |
| | Street | | | |
| | | | | |
| | | | | |
| | Chicago | | Illinois | 60643 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | | Email address | batlas@semradlaw.com |
| | | | | |
| | | | Illinois | |
| | Bar number | | State | |

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| Fill in this information to identify your case: | | | | | |
|---|---------------------------|-------------|----------------------|--|--|
| Debtor 1 | David | | Frazier | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | |
| Case number (If known) | | | (State) | | |

| | Check if | this | is | an |
|---|----------|---------|----|----|
| _ | amende | d filii | ng | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|--------------------------------------|
| Schedule A/B: Property (Official Form 106A/B) | |
| 1a. Copy line 55, Total real estate, from <i>Schedule A/B</i> | \$0.00 |
| 4b Con For CO Table and a form Cohol (c. 4/2) | \$3,240.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$3,240.00 |
| t 2: Summarize Your Liabilities | |
| | Your liabilities |
| | Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | \$315.00 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | 40.000 |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| | \$19,356.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$19,671.00 |
| Your total liabilities | \$19,671.00 |
| | \$19,671.00 |
| Your total liabilities Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) | \$19,671.00 \$3,030.70 |
| Your total liabilities rt 3: Summarize Your Income and Expenses | <u> </u> |
| Your total liabilities Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) | <u> </u> |

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| Debt | tor 1 David | | Frazier | Case number (if known) | | | | | |
|---------------|---|---|-------------------------------|---|------------|--|--|--|--|
| David | First Name | Middle Name lestions for Administrat | Last Name | arda | | | | | |
| Part 4 | Answer These Qu | estions for Administrat | ive and Statistical Rec | oras | | | | | |
| 6. A ı | 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? | | | | | | | | |
| | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | | | |
| Ŀ | Yes. | | | | | | | | |
| 7 W | . What kind of debt do you have? | | | | | | | | |
| | • | | | | | | | | |
| Ŀ | | | | d by an individual primarily for a personal, al purposes. 28 U.S.C. § 159. | | | | | |
| | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | | | |
| | | | | 0.00 | | | | | |
| | | our Current Monthly Income Form 122B Line 11; OR , Fo | . , , | ionthly income from Official | \$3,800.96 | | | | |
| | | | | | | | | | |
| 9. | Copy the following speci | ial categories of claims fro | m Part 4, line 6 of Schedu | lle E/F: | | | | | |
| | From Part 4 on Schedule | E/F, copy the following: | | Total claim | | | | | |
| | 9a. Domestic support obli | gations (Copy line 6a.) | | \$0.00 | | | | | |
| | 9b. Taxes and certain other | er debts you owe the governr | ment. (Copy line 6b.) | \$0.00 | | | | | |
| | | rsonal injury while you were i | | \$0.00 | | | | | |
| | • | | (, | \$0.00 | | | | | |
| | 9d. Student loans. (Copy | 9d. Student loans. (Copy line 6f.) | | | | | | | |
| | 9e. Obligations arising out priority claims. (Copy line 6 | of a separation agreement o | r divorce that you did not re | port as \$0.00 | | | | | |
| | Of Dobto to popular as as | ofit charing plans, and other | aimilar dahta (Capy lina Ch | \$0.00 | | | | | |
| | ar. Debts to pension or pro | ofit-sharing plans, and other | similar debts. (Copy line on. | | | | | | |

\$0.00

9g. Total. Add lines 9a through 9f.

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| Fill in this | information to identify your o | case: | | | |
|--|---|---|---|---|---|
| | | | | | |
| Debtor 1 | David First Name | Middle Na | Frazier me Last Name | | |
| Debtor 2 | i iist ivairie | Middle Na | Last Name | | |
| (Spouse, if fil | ing) First Name | Middle Na | me Last Name | | |
| United Sta | tes Bankruptcy Court for the: | Northern | District of Illinois (State) | | |
| Case num (If known) | ber | | | | |
| Officia | l Form 106A/B | | _ | | Check if this is an amended filing |
| Sched | dule A/B: Prope | erty | | | 12/1 |
| category v responsibl write your | where you think it fits best. e for supplying correct info name and case number (if | Be as complete an rmation. If more sp known). Answer ev | t an asset only once. If an asset fits in more to d accurate as possible. If two married people ace is needed, attach a separate sheet to the ery question. d, or Other Real Estate You Own or Ha | e are filing together, both a is form. On the top of any a | are equally |
| | | _ | | | |
| | No. Go to Part 2 | quitable interest in | any residence, building, land, or similar pro | perty? | |
| ✓ | | | | | |
| ΙШ | Yes. Where is the property? | | | | |
| | | | What is the property? Check all that apply. | | claims or exemptions. Put ired claims on <i>Schedule D:</i> |
| 1.1 | Street address, if available, or other description | | Single-family home | | aims Secured by Property. |
| | | | Duplex or multi-unit building | Current value of the | Current value of the |
| | | | Condominium or cooperative | entire property? | portion you own? |
| | | | Manufactured or mobile home | | |
| | Number Street | | Land | Describe the nature of | f vour ownership |
| | Number Street | | Investment property | Describe the nature of interest (such as fee s | |
| | City State | Zip Code | Timeshare Other | the entireties, or a life | |
| | City Citate | • | Who has an interest in the property? Check | Check if this is co | ommunity property |
| | | | one. | | |
| | | | Debtor 1 only | | |
| | | | Debtor 2 only | | |
| | | | Debtor 1 and Debtor 2 only | | |
| | | | At least one of the debtors and another | | |
| | | | Other information you wish to add about this | s item, such as local | |
| | | | property identification number: | | |
| If you | own or have more than one, | | | | |
| 4.0 | | | What is the property? Check all that apply. | | claims or exemptions. Put ired claims on <i>Schedule D:</i> |
| 1.2 | Street address, if available, or | other description | Single-family home | | aims Secured by Property. |
| | | | Duplex or multi-unit building | Current value of the | Current value of the |
| | | | Condominium or cooperative | entire property? | portion you own? |
| | | | Manufactured or mobile home | | |
| | Number Street | | Land Investment property | Describe the nature of | f your ownership |
| | | | Timeshare | interest (such as fee s | |
| | City State | Zip Code | Other | the entireties, or a life | e estate), if known. |
| | | | | Check if this is co | ommunity property |
| | | | Who has an interest in the property? Check one. | (see instructions) | |
| | | | Debtor 1 only | | |
| | | | Debtor 2 only | | |
| | | | Debtor 1 and Debtor 2 only | | |
| | | | At least one of the debtors and another | | |
| | | | Ш | | |
| | | | Other information you wish to add about this property identification number: | s item, such as local | |

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| Debtor 1 | David First Name | Middle Name | Frazier Last Name | Case number | (if known) | |
|-------------|---|------------------------|--|-------------------|--|--|
| 1.3Stree | eet address, if available, or ot | v | What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | apply. | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property. Current value of the portion you own? |
| Nur City | mber Street | Zip Code | Land Investment property Timeshare Other | _ | Describe the nature or interest (such as fee s the entireties, or a life | imple, tenancy by |
| | |]]]] | Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an | other | Check if this is co (see instructions) | mmunity property |
| | the dollar value of the po ve attached for Part 1. Wr | tion you own for a | . | uding any entries | s for pages | |
| | Describe Your Vehicle | | in any vehicles, whether they are | registered or no | t? Include any vehicles | |
| you own t | that someone else drives. If y ans, trucks, tractors, sport ut | ou lease a vehicle, a | also report it on Schedule G: Executo | - | - | |
| 3.1 | Model: Year: | Chrysler Concorde 2004 | Who has an interest in the propone. Debtor 1 only | perty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property. |
| | Approximate mileage: Other information: | 81000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this is community | | Current value of the entire property? \$2325.00 | Current value of the portion you own? \$2325.00 |
| 3.2 | Make Model: Year: | | who has an interest in the propone. Debtor 1 only | perty? Check | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this is community instructions) | | Current value of the entire property? | Current value of the portion you own? |

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| kimate mileage: information: kimate mileage: information: | | Who has an interest in the pone. Debtor 1 only Debtor 2 only At least one of the debtors Check if this is communiinstructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | ly and another ity property (see | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class | red claims on Schedule aims Secured by Property Current value of the portion you own? claims or exemptions. Pared claims on Schedule |
|---|--|--|---|--|--|
| information: | | Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only | and another ity property (see | Do not deduct secured the amount of any secu | claims or exemptions. Fired claims on Schedule |
| kimate mileage: | | At least one of the debtors Check if this is communi instructions) Who has an interest in the p one. Debtor 1 only Debtor 2 only | and another ity property (see | the amount of any secu | ıred claims on <i>Schedule</i> |
| kimate mileage: | | Check if this is communi instructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only | ity property (see | the amount of any secu | ıred claims on <i>Schedule</i> |
| kimate mileage: | | who has an interest in the pone. Debtor 1 only Debtor 2 only | | the amount of any secu | red claims on <i>Schedule</i> |
| kimate mileage: | | one. Debtor 1 only Debtor 2 only | roperty? Check | the amount of any secu | ıred claims on <i>Schedule</i> |
| kimate mileage: | | Debtor 1 only Debtor 2 only | | _ | |
| · · | | Debtor 2 only | | Oreanors with thave old | |
| · · | | = ' | | | inis decured by Fropert |
| information: | | Debtor 1 and Debtor 2 only | _ | Current value of the entire property? | Current value of the portion you own? |
| | | , L | • | entire property: | portion you own: |
| | | At least one of the debtors | and another | | |
| | | Check if this is communi instructions) | ity property (see | | |
| : | | Who has an interest in the pone. | roperty? Check | the amount of any secu | red claims on <i>Schedule</i> |
| | | Debtor 1 only | | Creditors Who Have Cla | ims Secured by Propert |
| kimate mileage: | | Debtor 2 only | | Current value of the | Current value of the |
| information: | | Debtor 1 and Debtor 2 only | y | entire property? | portion you own? |
| | | At least one of the debtors | and another | | |
| | | Check if this is communi instructions) | ity property (see | | |
| | | - | roperty? Check | | · · · · · · · · · · · · · · · · · · · |
| | | one. | | _ | |
| kimate mileage: | | | | | , , |
| · · | | | | Current value of the | Current value of the portion you own? |
| information: | | Debtor 1 and Debtor 2 only | • | entire property: | portion you own? |
| | | At least one of the debtors Check if this is communi | and another | | |
| | | | | | |
| | kimate mileage: information: kimate mileage: | kimate mileage: information: kimate mileage: | Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl At least one of the debtors Check if this is communinistructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only | one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Current value of the entire property? Do not deduct secured the amount of any secured the a |

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| De | ebtor 1 | David | Frazier | Case number (if known) | |
|--------------|------------|----------------------------------|---|------------------------------|---|
| | | First Name | Middle Name Last Name | | |
| Pa | rt 3: | Describe Y | our Personal and Household Items | | |
| D | o you | ı own or hav | e any legal or equitable interest in any of the following it | ems? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | | and furnishings liances, furniture, linens, china, kitchenware | | |
| <u>✓</u> | | Describe | Misc. Household Goods | | \$375.00 |
| | | tronics oles: Television | s and radios; audio, video, stereo, and digital equipment; computers, | printers, scanners; music | |
| ✓ | Yes. | Describe | Misc. Electronics | | \$150.00 |
| | | • | ue ind figurines; paintings, prints, or other artwork; books, pictures, or ot in, or baseball card collections; other collections, memorabilia, collectil | | |
| ✓ | No Yes. | Describe | | | |
| | - | oles: Sports, ph | rts and hobbies otographic, exercise, and other hobby equipment; bicycles, pool table s; carpentry tools; musical instruments | es, golf clubs, skis; canoes | |
| ✓ | No Yes. | Describe | | | |
| | | earms | es, shotguns, ammunition, and related equipment | | |
| | No | Jies. 1 istois, iiii | es, snotguns, ammuniton, and related equipment | | |
| 뇓 | | Describe | | | |
| ш | 100. | Describe | | | |
| | | | clothes, furs, leather coats, designer wear, shoes, accessories | | |
| Ц | No | Describe | Miss Hand Olathin a | | |
| ⊻. | | | Misc. Used Clothing | | \$250.00 |
| | | • | ewelry, costume jewelry, engagement rings, wedding rings, heirloom j r | jewelry, watches, gems, | |
| Щ | No | D | | | |
| ⊻ | Yes. | Describe | Misc. Jewelry | | \$100.00 |
| | Examp | n-farm animal ples: Dogs, cat | s, birds, horses | | |
| $oxed{oxed}$ | No Yes. | Describe | | | |
| 1 | 4. An | y other persor | al and household items you did not already list, including any he | ealth aids you did not list | |
| ✓ | No | | | | |
| | Yes. | Describe | | | |
| | | | lue of all of your entries from Part 3, including any entries for pa | - | \$875.00 |

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| Debt | tor 1 David | | Frazier | Case number (if known) | |
|--------|---|--|-----------------------------|--|--|
| | First Name | Middle Name | Last Name | | |
| Part 4 | 4: Describe Your I | Financial Assets | | | |
| Do | you own or have an | y legal or equitable interest | in any of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Cash | | | | |
| E | No | ave in your wallet, in your home, in | · | | |
| 47 | <u> </u> | | | Cash: | |
| 17. | and other similar in | avings, or other financial accounts nstitutions. If you have multiple acc | | s in credit unions, brokerage houses, on, list each. | |
| | No | | la atituti a a a a a a | | |
| | ✓ Yes | | Institution name: | | |
| | | 17.1. Checking account: | | | |
| | | 17.2. Checking account: | | | |
| | | 17.3. Savings account: | | | |
| | | 17.4. Savings account: | | | |
| | | 17.5. Certificates of deposit: | | | |
| | | 17.6. Other financial account: | NuMark Credit Union | | \$40.00 |
| | | 17.7. Other financial account: | | | |
| | | 17.8. Other financial account: | | | |
| | | 17.9. Other financial account: | | | |
| 18. | | or publicly traded stocks , investment accounts with broker | age firms, money market acc | ounts | |
| | ✓ No | | | | |
| | Yes | Institution or issuer name: | | | |
| | | | | | |
| | | - | | | |
| 19. | Non-publicly traded s an LLC, partnership, | | ted and unincorporated bu | sinesses, including an interest in | |
| | ✓ No | | | | |
| | Yes. Give specific | Name of entity | | % of ownership: | |
| | information about them | | | | |
| | uioiii | | | | |
| | | | | | |

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| Debt | tor 1 David | | Frazier | Case number (if known) | |
|------|--|---|----------------------------|---|--|
| | First Name | Middle Name | Last Name | | |
| 20. | Negotiable instruments | orate bonds and other negotials include personal checks, cashiers ents are those you cannot transfer assuer name: | checks, promissory no | tes, and money orders. | |
| | | | | | |
| 21. | Retirement or pension Examples: Interests in II | | . thrift savings accounts | s, or other pension or profit-sharing plans | |
| | ✓ No | ,, | , | ,, | |
| | Yes. List each | Type of account: | Institution name: | | |
| | account | 401(k) or similar plan: | | | |
| | separately. | Pension plan: | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | _ | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| | | Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract for | or a periodic payment of money to | you, either for life or fo | r a number of years) | |
| | ✓ No Yes | Issuer name and description: | | · · | |
| | | | | | |
| | | | | | |
| | | | | | |

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| Debt | tor 1 David | Frazier Middle Name Last Name | Case number (if known) | |
|------|---|--|--|---|
| 24. | First Name | Middle Name Last Name IRA, in an account in a qualified ABLE program | m or under a qualified state tuition program | |
| 24. | 26 U.S.C. §§ 530(b)(1), 52 | | ii, or under a quanned state tuttion program. | |
| | ✓ No Institution n Yes | ame and description. Separately file the records of | any interests.11 U.S.C. § 521(c): | |
| | | | | |
| 25. | · • | re interests in property (other than anything list | ted in line 1), and rights or powers | |
| | exercisable for your bene | ;iit | | |
| | Yes. Describe | | | |
| 26. | | lemarks, trade secrets, and other intellectual p names, websites, proceeds from royalties and licer | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| 27. | | d other general intangibles s, exclusive licenses, cooperative association holdin | gs, liquor licenses, professional licenses | |
| | ✓ No Yes. Describe | | | |
| | | | | |
| | | | | |
| Moi | ney or property owed to | you? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ney or property owed to Tax refunds owed to you | you? | | portion you own? Do not deduct secured |
| | | you? | | portion you own? Do not deduct secured |
| | Tax refunds owed to you ✓ No — Yes. Give specific inform | nation | Federal: | portion you own? Do not deduct secured |
| | Tax refunds owed to you ✓ No | nation ding whether he returns | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed to you No Yes. Give specific inforr about them, incluyou already filed them. | nation ding whether he returns | | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific inform about them, incluyou already filed the and the tax years. Family support Examples: Past due or lump | nation ding whether he returns | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific inforr about them, inclu you already filed the and the tax years. Family support | nation ding whether he returns | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific informabout them, incluyou already filed thand the tax years. Family support Examples: Past due or lump | nation ding whether he returns | State: Local: intenance, divorce settlement, property settlemen | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific informabout them, incluyou already filed thand the tax years. Family support Examples: Past due or lump | nation ding whether he returns | State: Local: uintenance, divorce settlement, property settlemen Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t |
| 28. | Tax refunds owed to you No Yes. Give specific informabout them, incluyou already filed thand the tax years. Family support Examples: Past due or lump | nation ding whether he returns | State: Local: uintenance, divorce settlement, property settlemen Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 |
| 29. | Tax refunds owed to you ✓ No Yes. Give specific informabout them, incluyou already filed thand the tax years. Family support Examples: Past due or lump ✓ No Yes. Give specific information | mation ding whether he returns o sum alimony, spousal support, child support, ma | State: Local: intenance, divorce settlement, property settlemen Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to you No Yes. Give specific informabout them, incluyou already filed thand the tax years. Family support Examples: Past due or lump No Yes. Give specific information Other amounts someone Examples: Unpaid wages, d | mation ding whether he returns o sum alimony, spousal support, child support, ma | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to you ✓ No Yes. Give specific informabout them, incluyou already filed thand the tax years. Family support Examples: Past due or lump ✓ No Yes. Give specific inform Other amounts someone Examples: Unpaid wages, do Social Security be | mation ding whether he returns o sum alimony, spousal support, child support, ma mation owes you lisability insurance payments, disability benefits, sic | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to you No Yes. Give specific informabout them, incluyou already filed thand the tax years. Family support Examples: Past due or lump No Yes. Give specific information Other amounts someone of Examples: Unpaid wages, described by Social Security by | mation ding whether he returns o sum alimony, spousal support, child support, ma mation owes you lisability insurance payments, disability benefits, sic | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb ⁻ | tor 1 David | | Frazier | Case number (if known) | |
|------------------|---|--------------------------|--|---|--|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance pol Examples: Health, disability, | | h savings account (HSA); credit, h | omeowner's, or renter's insurance | |
| | Yes. Name the insurance of each policy and list it | ce company | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | property because someone No | a living trust, expect p | | y, or are currently entitled to receive | |
| | Yes. Describe | | | | |
| 33. | | | ou have filed a lawsuit or made ance claims, or rights to sue | a demand for payment | |
| 34. | Other contingent and unl to set off claims | iquidated claims of e | very nature, including counterc | claims of the debtor and rights | |
| | No Yes. Describe | | | | |
| 35. | Any financial assets you o | lid not already list | | | |
| | Ves. Describe | | | | |
| 36. | | - | Part 4, including any entries fo | | \$40.00 |
| Part | 5: Describe Any Busin | ness-Related Prop | erty You Own or Have an Ir | nterest In. List any real estate in Part | 1. |
| 37. | Do you own or have any le | egal or equitable inte | rest in any business-related pr | operty? | |
| | No. Go to Part 6. Yes. Go to line 38. | | | pc Do | urrent value of the ortion you own? o not deduct secured claims exemptions |
| 38. | Accounts receivable or co | ommissions you alrea | ady earned | | |
| | Yes. Describe | | | | |
| 39. | Office equipment, furnish Examples: Business-related | | modems, printers, copiers, fax ma | achines, rugs, telephones, desks, chairs, electro | onic devices |
| | ✓ No Yes. Describe | | | | |
| | | | | | |

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| Deb | tor 1 David | | Frazier | Case number (if known) | |
|-------|--------------------------------------|---|--|---------------------------------|------------------------------|
| 10 | First Name | Middle Name | Last Name | _ | |
| 40. | machinery, fixtures, e | quipment, supplies you u | se in business, and tools of your trad | e | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 41 | Inventory | | | | |
| 41. | | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 42. | Interests in partnersh | ips or joint ventures | | | |
| | ✓ No | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| | | N | Name of entity: | % of ownership: | |
| | Yes. Give specific information about | | | | |
| | them | - | | | _ |
| | | _ | | | <u> </u> |
| | | | | | |
| 43. | Customer lists, mailing | lists, or other compilation | ons | | _ |
| | — | , | | | |
| | No No No your lists in | neluda pareanellu idantifiahl | e information (as defined in 11 U.S.C. § | 101//10\)2 | |
| | Tes. Do your lists if | include personally identifiable | e illiolittation (as defined ill 11 0.3.0. 9 | 101(41A))! | |
| | No | | | | |
| | Yes. Desc | ribe | | | |
| | | | | | |
| 44. | Any business-related | property you did not alrea | ady list | | |
| | ✓ No | | | | |
| | Yes. Give specific | - | | | |
| | information | - | | | |
| | | _ | | | <u> </u> |
| | | | | | |
| | | - | | | |
| | | _ | | | |
| | | | | | |
| | | - | | | |
| 45. A | dd the dollar value of a | all of your entries from Pa | rt 5, including any entries for pages | you have attached | |
| | | - | | = | |
| | Describe Any E | arm- and Commoroid | Fishing-Related Property You (| Dwn or Have an Interest In | |
| Part | If you own or have an | interest in farmland, list it in | Part 1. | JWII OF Have all litterest III. | |
| 46. | | | rest in any farm- or commercial fishi | ng-related property? | |
| 40. | - | iny legal of equitable lifte | rest in any larin- or commercial lish | ng-related property: | Current value of the |
| | No. Go to Part 7. | | | | portion you own? |
| | Yes. Go to line 47. | | | | Do not deduct secured claims |
| 47 | Form onin!- | | | | or exemptions |
| 47. | Farm animals Examples: Livestock, p | oultry, farm-raised fish | | | |
| | | , | | | |
| | No Describe | | | | |
| | Yes. Describe | | | | |
| | | | | | |

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| 18. Crops-either growing or harvested No Yes. Describe 19. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No Yes. Describe 19. Farm and fishing supplies, chemicals, and feed No Yes. Describe 19. Any farm- and commercial fishing-related property you did not already list No Yes. Describe 19. Any farm- and commercial fishing-related property you did not already list No Yes. Describe 19. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached No Yes. Describe 19. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached No Yes. Ches specific No Yes. Ches specific No Yes. Ches specific Information Yes. Ches specific Information Yes. Ches specific No | Debt | or 1 David | | razier ast Name | Case number (if known) | |
|--|--------------|-----------------------------|--|---------------------------------------|------------------------------|-------------|
| Parm and fishing equipment, implements, machinery, fixtures, and tools of trade No | 48. | | | ast ivalie | | |
| No | | | | | | |
| Solution Section Sec | 49. | Farm and fishing equip | oment, implements, machinery, fixture | es, and tools of trade | | |
| 50. Farm and fishing supplies, chemicals, and feed No | | ✓ No | | | | |
| No Yes. Describe | | Yes. Describe | | | | |
| Yes. Describe | 50. | Farm and fishing suppl | ies, chemicals, and feed | | | |
| 51. Any farm- and commercial fishing-related property you did not already list No Yes. Describe S2. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached or Part 6. Write that number here | | ✓ No | | | | |
| Section Sect | | Yes. Describe | | | | |
| Section Sect | | L | | | | |
| Yes. Describe 22. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached or Part 6. Write that number here | 51. | | cial fishing-related property you did | not already list | | |
| 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached or Part 6. Write that number here | | <u> </u> | | | | |
| Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No No Yes. Give specific information 64. Add the dollar value of all of your entries from Part 7. Write that number here Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 56. part 2 total vehicles, line 5 57. Part 3: Total personal and household items, line 15 58. Part 4. Total financial assets line 36 | | Too. Boombo | | | | |
| 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information 54. Add the dollar value of all of your entries from Part 7. Write that number here | | | | | ou have attached | |
| 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information 54. Add the dollar value of all of your entries from Part 7. Write that number here | • | | | | L | |
| 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information 54. Add the dollar value of all of your entries from Part 7. Write that number here | | | | | | |
| 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information 54. Add the dollar value of all of your entries from Part 7. Write that number here | Part 1 | Describe All Pro | perty You Own or Have an Intere | est in That You Did Not | t List Above | |
| V No Vas. Give specific information S4. Add the dollar value of all of your entries from Part 7. Write that number here Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 56. part 2 total vehicles, line 5 57. Part 3: Total personal and household items, line 15 \$2325.00 \$875.00 | | Do you have other prop | perty of any kind you did not already l | | | |
| Yes. Give specific information 54. Add the dollar value of all of your entries from Part 7. Write that number here Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 56. part 2 total vehicles, line 5 57. Part 3: Total personal and household items, line 15 58 Part 4: Total financial assets line 36 | | | s, country club membership | | | |
| Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 56. part 2 total vehicles, line 5 57. Part 3: Total personal and household items, line 15 58 Part 4: Total financial assets line 36 | | | | | | |
| Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 | | | | | | |
| Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 | | | | | | |
| Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 | | | | | | |
| 55. Part 1: Total real estate, line 2 | 54. A | dd the dollar value of al | l of your entries from Part 7. Write the | at number here | | |
| 55. Part 1: Total real estate, line 2 | | | | | | |
| 55. Part 1: Total real estate, line 2 | | | | | | |
| 55. Part 1: Total real estate, line 2 | | | | | | |
| 56. part 2 total vehicles, line 5 \$2325.00 57. Part 3: Total personal and household items, line 15 \$875.00 | Part 8 | List the Totals of | Each Part of this Form | | | |
| 57. Part 3: Total personal and household items, line 15 \$875.00 | 55. F | Part 1: Total real estate | , line 2 | | > | |
| 57.Part 3: Total personal and household items, line 15 \$875.00 | 56. p | part 2 total vehicles, line | e 5 | \$2325.00 | | |
| 58 Part 4: Total financial assats line 36 | 57. P | art 3: Total personal an | d household items, line 15 | | | |
| \$40.00 | 58. P | art 4: Total financial as | sets, line 36 | \$40.00 | | |
| 59. Part 5: Total business-related property, line 45 | 59. F | Part 5: Total business-re | elated property, line 45 | · · · · · · · · · · · · · · · · · · · | | |
| 60. Part 6: Total farm- and fishing-related property, line 52 | 60. F | Part 6: Total farm- and f | ishing-related property, line 52 | | | |
| 61. Part 7: Total other property not listed, line 54 | 61. F | Part 7: Total other prope | erty not listed, line 54 | | | |
| 62. Total personal property. Add lines 56 through 61 | 62. 1 | otal personal property. | Add lines 56 through 61 | \$3240.00 | 0 | + \$3240.00 |
| Copy personal property total | | | | | Copy personal property total | |
| | 63. T | otal of all property on S | chedule A/B. Add line 55 + line 62 | | | \$3240.00 |
| ***** | 63. T | otal of all property on S | chedule A/B. Add line 55 + line 62 | | | \$3240.00 |

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|-----------------------------------|---|---|---|---|---|---|--|
| Fill | in this inforn | nation to identify your ca | se: | | | | |
| Deb | otor 1 | David | | Frazier | | | |
| Deb | otor 2 | First Name | Middle N | lame Last Nar | ne | | |
| (Spc | ouse, if filing) | First Name | Middle N | lame Last Nar | ne | | |
| Uni | ted States Ba | ankruptcy Court for the: | Northern | District of Illin | | | |
| | se number | | | (Sta | | | |
| (If kn | nown) | | | | | | Check if this is an |
| Of | fficial F | Form 106C | | | | | amended filing |
| Sc | hadula | C: The Prope | arty Vou (| Claim as Even | nnt | | 04/16 |
| | | | | | together, both are equally | responsible fo | or supplying correct |
| info as e | rmation. U exempt. If n | sing the property you | listed on <i>Sche</i> fill out and atta | edule A/B: Property (Cach to this page as ma | fficial Form 106A/B) as yo | ur source, list | the property that you claim necessary. On the top of any |
| stat the tax- und you | te a specif amount of exempt re ler a law the r exemption | ic dollar amount as e f any applicable statu etirement funds—ma | exempt. Altern tory limit. Sor y be unlimited ion to a partic to the applicab | atively, you may claime exemptions—such in dollar amount. He ular dollar amount a de statutory amount. | h as those for health aids owever, if you claim an e | ue of the propo s, rights to reco emption of 10 | ne way of doing so is to erty being exempted up to eive certain benefits, and 00% of fair market value ned to exceed that amount, |
| 1. | Which set | of exemptions are you o | claiming? Check | one only, even if your sp | ouse is filing with you. | | |
| | ✓ You a | re claiming state and fed | deral nonbankru | uptcy exemptions. 11 U. | S.C. § 522(b)(3) | | |
| | You a | re claiming federal exen | nptions. 11 U.S. | C. § 522(b)(2) | | | |
| 2. | For any pr | operty you list on Sched | lule A/B that yo | u claim as exempt, fill i | the information below. | | |
| | D 4 . C 4 | | | value of America | | 0 | the state of the s |

Amount of the exemption you claim line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$375.00 description: **✓** \$375.00 Misc. Household Goods 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(a) \$250.00 description: $\overline{\mathbf{V}}$ \$250.00 Misc. Used Clothing 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

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Debtor 1 David Frazier Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property own Check only one box for each exemption. Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$150.00 description: **✓** \$150.00 Misc. Electronics 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) \$100.00 description: **✓** \$100.00 Misc. Jewelry 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$0.00 description: **✓** Cash on hand 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 16 735 ILCS 5/12-1001(c); 735 ILCS Brief \$2,325.00 description: 5/12-1001(b) \$2,010.00; \$0.00 Chrysler Concorde, 2004 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 03 Brief 735 ILCS 5/12-1001(b) \$40.00 description: \$40.00 Other financial account,

100% of fair market value, up to any

applicable statutory limit

NuMark Credit Union

17

Line from Schedule A/B:

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| | | DC | cument Page 22 01 | 70 | | |
|----------------------------|---|---------------------------------|---|--|---|------------------------------------|
| Fill in this | information to identify your ca | se: | | | | |
| Debtor 1 | David | | Frazier | | | |
| 200101 | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if fi | iling) First Name | MC-Lille Miner | Leat News | | | |
| (Spouse, II II | iling) First Name | Middle Name | Last Name | | | |
| United Sta | ates Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case num | nber | | (State) | | | |
| Offici | al Form 106D | | | 4 | | Check if this is an amended filing |
| | | oro Who Ho | va Claima Sagur | ad by Prop | | Ū |
| | | | ve Claims Secure | | | 12/15 |
| more space | | | e are filing together, both are equ nber the entries, and attach it to t | | | |
| 1. D o a | any creditors have claims se | ecured by your proper | ty? | | | |
| | No. Check this box and subm | nit this form to the court | with your other schedules. You have | e nothing else to repo | ort on this form. | |
| | Yes. Fill in all of the information | n below. | | | | |
| Part 1: | List All Secured Claims | | | | | |
| _ | st all secured claims. If a credit | tor has more than one sec | cured claim, list the creditor | Column A | Column B | Column C |
| se | parately for each claim. If more th | nan one creditor has a par | ticular claim, list the other creditors | Amount of claim | Value of | Unsecured |
| | Part 2. As much as possible, list me. | tne claims in alphabetical | order according to the creditor's | Do not deduct the value of collateral. | collateral that supports this claim | portion If any |
| | S Financial Solutions | Describe the property | that secures the claim: | \$315.00 | \$2,325.00 | \$0.00 |
| | editor's Name 338 S Cicero Ave | Chrysler Concorde Val | | | | |
| | Number Street | | , the claim is: Check all that apply. | | | |
| _ | | Contingent | | | | |
| | icago IL 60638 | Unliquidated | | | | |
| City Wh | y State ZIP Code no owes the debt? Check one. | Disputed | | | | |
| ✓ | Debtor 1 only | Nature of lien. Check | all that apply. | | | |
| | Debtor 2 only | | made (such as mortgage or secured | | | |
| | Debtor 1 and Debtor 2 only | car loan) Statutory lien (such | as tax lien, mechanic's lien) | | | |
| | At least one of the debtors and another | Judgment lien from | | | | |
| | Check if this claim relates to a community debt | Other (including a r | | | | |
| | te debt was | Last 4 digits of accou | nt number | | | |

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$315.00

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| Debtor 1 David Frazier First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106B). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors With Poll Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one ereditor holds an particular claim, list the creditor in Page 18 in the part and show both priority amounts. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | | | | | | | | | |
|--|--|---|---|---|---|---|--|---|---|
| First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (Irknown) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Winh Hold Claims Secured by Property in more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (If known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditors hold separately for more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular leading in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | Fill | in this infor | mation to identify your c | ase: | | | | | |
| Debtor 2 (Spouse, Iffiling) First Name Middle Name Last Name United States Bankruptcy Court for the: Northem District of Illinois (State) Case number (If Krown) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule 478: Property (Official Form 106A) and on Schedule 67: Executory Contracts and Unexpired Leases (Official Form 106A). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the creditor in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | Deb | otor 1 | David | | Frazier | | | | |
| United States Bankruptcy Court for the: Northern District of Illinois (State) | | | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the: Northern District of Illinois Case number (fixnown) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the reparty to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule 8. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 9. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 9. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 9. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 9. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 9. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 9. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims and partially secured claims and partially secured claims. If unit partially secured claims are listed in Schedule 9. Executory contracts and Unexpired Leases (Official Form 106G). Do not include any creditors and partially secured claims. If unit partially secured claims are listed in Schedule 9. Executory contracts and unit partially secured claims. If unit partially secured claims are listed in Schedule 9. Executory contracts and unit partially secured claims. If unit partially secured claims are listed in Schedule 9. Executory contracts and unit | | | | | | | | | |
| Case number ((State)) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A) and on Schedule C: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? Ves. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | (Spc | ouse, if filing) | First Name | Middle Name | Last Name | | | | |
| Case number ((Itknown)) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | Uni | ted States E | ankruptcy Court for the: | Northern | District of Illinois | | | | |
| Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? Ves. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | _ | | | | (State) | | | | |
| Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | | | | | | | | | |
| Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? Ves. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | <u> </u> | | orm 106F/F | | | | Ch | eck if this is ar | n amended filing |
| Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | | | | | | | _ | | |
| other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on <i>Schedule A/B: Property</i> (Official Form 106A/B) and on <i>Schedule G: Executory Contracts and Unexpired Leases</i> (Official Form 106G). Do not include any creditors with partially secured claims that are listed in <i>Schedule D: Creditors Who Hold Claims Secured by Property</i> . If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | Sc | chedu | ıle E/F: Cre | editors Who | Have Unse | cured Claims | | | 12/15 |
| Yes. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | othe Forn clair the c know | er party to a n 106A/B) a ms that are entries in t wn). | any executory contracts and on <i>Schedule G: Exe</i> Ilisted in <i>Schedule D:</i> C he boxes on the left. At | s or unexpired leases that ecutory Contracts and Une Creditors Who Hold Claims tach the Continuation Pag | could result in a claim. xpired Leases (Official Secured by Property. It | Also list executory contract Form 106G). Do not include a more space is needed, copy | s on <i>Sched</i> iny credito the Part y | <i>ule A/B: Prop</i> rs with partia ou need, fill i | perty (Official ally secured it out, number |
| Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | 1. | Do any ci | editors have priority ur | nsecured claims against ye | ou? | | | | |
| 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | | √ No. (| Go to Part 2. | | | | | | |
| listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | | Yes. | | | | | | | |
| | 2. | listed, ider As much a Continuat | ntify what type of claim it as possible, list the claims ion Page of Part 1. If mor | is. If a claim has both priorit is in alphabetical order accord to than one creditor holds a p | y and nonpriority amount ling to the creditor's name particular claim, list the oth | s, list that claim here and show e. If you have more than two poner creditors in Part 3. | both priorit | y and nonpric | ority amounts. |
| | | (For an ex | pianation of each type of | ciaim, see the instructions f | or this form in the instruc | tion booklet.) | Total | Priority | Nonpriority |

claim

amount

amount

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| Debte | or 1 David | Frazier | Case number (if known) | | | | | | | |
|-------|--|-----------|---|-------------|--|--|--|--|--|--|
| | First Name Middle Name | Last Name | | | | | | | | |
| Part | Part 2: List All of Your NONPRIORITY Unsecured Claims | | | | | | | | | |
| Į | Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. | | | | | | | | | |
| 4. I | | | | | | | | | | |
| | | | | Total claim | | | | | | |
| 4.1 | AD ASTRA RECOVERY SERV | | Last 4 digits of account number 2698 | \$1,830.00 | | | | | | |
| | Nonpriority Creditor's Name 7330 W 33RD ST N STE 118 | | When was the debt incurred? 4/2017 | | | | | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | | | | | | | |
| | | | Contingent | | | | | | | |
| | WICHITA Kansas 67205 | <u> </u> | Unliquidated | | | | | | | |
| | City State Zip Co Who incurred the debt? Check one. | de | Disputed | | | | | | | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | | | | | | | |
| | Debtor 2 only | | Student loans | | | | | | | |
| | Debtor 1 and Debtor 2 only | | 블 | | | | | | | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | | |
| | Check if this claim relates to a community debt | | Debts to pension or profit-sharing plans, and other similar debts | | | | | | | |
| | Is the claim subject to offset? | | 001 Collection; Collecting for | | | | | | | |
| | ✓ No | | ORIGINAL CREDITOR: SPEEDY Other. Specify CASH 181 | | | | | | | |
| | Yes | | | | | | | | | |
| 4.2 | ARS ACCOUNT RESOLUTION | | Last 4 digits of account number 5756 | \$885.00 | | | | | | |
| | Nonpriority Creditor's Name 1643 HARRISON PKWY STE 1 | _ | When was the debt incurred? 8/2013 | | | | | | | |
| | Number Street | | | | | | | | | |
| | | | As of the date you file, the claim is: Check all that apply. | | | | | | | |
| | SUNRISE Florida 33323 | | Contingent | | | | | | | |
| | City State Zip Co | de | Unliquidated | | | | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | | Disputed | | | | | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: Student loans | | | | | | | |
| | Debtor 1 and Debtor 2 only | | | | | | | | | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | | |
| | Check if this claim relates to a community debt | | Debts to pension or profit-sharing plans, and other similar debts | | | | | | | |
| | Is the claim subject to offset? | | 001 Collection; Collecting for | | | | | | | |
| | ✓ No | | ORIGINAL CREDITOR: MEDICAL Other. Specify PAYMENT DATA | | | | | | | |
| | Yes | | opoon | | | | | | | |
| 4.3 | CCI | | Lost 4 divite of account number 5000 | \$238.00 | | | | | | |
| | Nonpriority Creditor's Name | | Last 4 digits of account number 5233 When was the debt incurred? 8/2016 | | | | | | | |
| | 501 Greene Street # 302 Number Street | | | | | | | | | |
| | | | As of the date you file, the claim is: Check all that apply. | | | | | | | |
| | Augusta Georgia 30901 | | Contingent | | | | | | | |
| | City State Zip Co | de | Unliquidated | | | | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | | Disputed | | | | | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | | | | | | | |
| | Debtor 1 and Debtor 2 only | | Student loans | | | | | | | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | | |
| | Check if this claim relates to a community debt | | Debts to pension or profit-sharing plans, and other similar | | | | | | | |
| | Is the claim subject to offset? | | debts Collection; Collecting for | | | | | | | |
| | No | | ORIGINAL CREDITOR: 10 COMMONWEALTH EDISON | | | | | | | |
| | Yes | | Other. Specify COMPANY | | | | | | | |

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Debtor 1 David Frazier Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 City of Chicago - Parking and red Light Tickets \$3,000.00 Last 4 digits of account number Nonpriority Creditor's Name Department of Revenue - PO Box 88292 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60680 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ____ Parking Tickets Is the claim subject to offset? **✓** No Yes CNAC/MI105 \$7,949.00 1326 Last 4 digits of account number ___ Nonpriority Creditor's Name When was the debt incurred? 9/2014 3718 STADIUM DR Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated KALAMAZOO Michigan 49008 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Returned automobile, Judgment, Other. Specify 2016-M1-116408 Is the claim subject to offset? **✓** No Yes CONSUMER FINANCIAL SVC 4.6 \$303.00 Last 4 digits of account number 1801 Nonpriority Creditor's Name 7/2012 When was the debt incurred? 509 Green Bay Road Number Street As of the date you file, the claim is: Check all that apply. Contingent Waukegan 60085 Illinois Unliquidated Zip Code City State Disputed Who incurred the debt? Check one. Debtor 1 only $\overline{}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts

✓ No Yes

Is the claim subject to offset?

Other. Specify ____

006 Automobile

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Case number (if known) Debtor 1 David First Name Frazier Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| | After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. | | | | | | |
|-----|--|--|------------|--|--|--|--|
| 4.7 | DIVERSIFIED Nonpriority Creditor's Name Po Box 1391 Number Street | Last 4 digits of account number 4314 When was the debt incurred? 1/2017 As of the date you file, the claim is: Check all that apply. Contingent | \$1,287.00 | | | | |
| | Southgate Michigan 48195 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collection; Collecting for ORIGINAL CREDITOR: 11 Other. Specify SPRINT | | | | | |
| 4.8 | ENHANCED RECOVERY CO L Nonpriority Creditor's Name 8014 BAYBERRY RD Number Street JACKSONVILLE Florida 32256 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? Yes | When was the debt incurred? 3/2017 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 001 Collection; Collecting for ORIGINAL CREDITOR: COMCAST Other. Specify CABLE COMMUNICATIONS | \$855.00 | | | | |
| 4.9 | ENHANCED RECOVERY CO L Nonpriority Creditor's Name 8014 BAYBERRY RD Number Street JACKSONVILLE Florida 32256 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | When was the debt incurred? 8/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 001 Collection; Collecting for Other. Specify ORIGINAL CREDITOR: TMOBILE | \$449.00 | | | | |

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Debtor 1 David Frazier Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 \$621.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 64378 When was the debt incurred? 5/2017 Number As of the date you file, the claim is: Check all that apply. Contingent SAINT PAUL Minnesota 55164 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **|** ORIGINAL CREDITOR: ATT **✓** No Other. Specify DIRECTV Yes 4.11 Illinois Tollway \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 2700 Ogden Ave When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Legal Dept Contingent Unliquidated 60515 Downers Grove Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify __ Notice Only Is the claim subject to offset? **✓** No Yes MED BUSI BUR 4.12 \$150.00 2237 Last 4 digits of account number Nonpriority Creditor's Name 1460 RENAISSANCE D SUITE 400 When was the debt incurred? 10/2015 Number As of the date you file, the claim is: Check all that apply. Contingent PARK RIDGE 60068 Illinois Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: MEDICAL **✓** No

Yes

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Debtor 1 David Frazier Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 NATIONWIDE CREDIT & CO \$428.00 Last 4 digits of account number Nonpriority Creditor's Name 815 COMMERCE DR STE 270 When was the debt incurred? 12/2015 As of the date you file, the claim is: Check all that apply. Contingent OAK BROOK Illinois 60523 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **|** ORIGINAL CREDITOR: MEDICAL **✓** No Other. Specify PAYMENT DATA Yes 4.14 NATIONWIDE CREDIT & CO \$236.00 Last 4 digits of account number 9961 Nonpriority Creditor's Name 815 COMMERCE DR STE 270 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent OAK BROOK Illinois 60523 Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: MEDICAL **✓** No Other. Specify PAYMENT DATA Yes Rush Oak Park Hospital 4.15 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 520 S. Maple Ave When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Oak Park Illinois 60304 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify _ Notice Only Is the claim subject to offset? **✓** No

Yes

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Frazier Debtor 1 David Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 **STANISCCONTR** \$213.00 Last 4 digits of account number 27N1 Nonpriority Creditor's Name 914 14TH ST POB 480 When was the debt incurred? 12/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent MODESTO 95353 California Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: MEDICAL **✓** No Yes 4.17 STELLAR RECOVERY INC \$912.00 Last 4 digits of account number 4656 Nonpriority Creditor's Name PO Box 1119 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Charlotte North Carolina 28201 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: DISH **✓** No

Other. Specify

NETWORK

Yes

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Debtor 1 David Frazier Case number (if known) Middle Name First Name Last Name Part 3: List Others to Be Notified About a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Walinski & Associates P.C. On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check 221 N LaSalle # 1000 Line 4.5 Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Chicago Illinois 60601 Last 4 digits of account number 1326 City State Zip Code HARRIS & HARRIS LTD On which entry in Part 1 or Part 2 did you list the original creditor? 111 W JACKSON BLVD S-400 of (Check Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured CHICAGO Illinois 60604 Last 4 digits of account number State Zip Code Illinois Secretary of State On which entry in Part 1 or Part 2 did you list the original creditor? of (Check 2701 S Dirksen Pkwy Part 1: Creditors with Priority Unsecured Claims one):

Last 4 digits of account number

Number

Springfield

City

Street

Illinois

State

62723

Zip Code

Part 2: Creditors with Nonpriority Unsecured

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Debtor 1 David Frazier Case number (if known) Middle Name First Name Last Name Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here.

\$0.00

6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar \$19,356.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$19,356.00 6j. Total. Add lines 6f through 6i.

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| Fill in this infor | mation to identify your c | ase: | | |
|---------------------|---------------------------|-------------|----------------------|--|
| Debtor 1 | David | | Frazier | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Sankruptcy Court for the: | Northern | District of Illinois | |
| Case number | | | (State) | |
| (If known) | | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| | | | Do | cument rage | C 33 01 70 |
|----------|----------------------------|---|------------------------------|-----------------------------|---|
| Fill i | n this infor | mation to identify your c | ase: | | |
| Deb | tor 1 | David | | Frazier | |
| | | First Name | Middle Name | Last Name | |
| | tor 2 | | | | |
| (Spot | use, if filing) | First Name | Middle Name | Last Name | |
| Unit | ed States E | Sankruptcy Court for the: | Northern | District of Illinois | |
| Case | e number | | | (State) | |
| (If kno | | | | | |
| | | | | | Check if this is an |
| | . | | | | amended filing |
| Of | ficial | Form 106H | | | |
| <u> </u> | la a al l | . II. V O. | lalatawa | | |
| SC. | neaui | e H: Your Cod | leptors | | 12/15 |
| the e | entries in t vn). Answe | he boxes on the left. At r every question. | | to this page. On the to | e space is needed, copy the Additional Page, fill it out, and number op of any Additional Pages, write your name and case number (if a codebtor.) |
| | Idaho, Lou | isiana, Nevada, New Me | lived in a community pro | | ? (Community property states and territories include Arizona, California, in.) |
| | | Go to line 3. | | | |
| | | | er spouse, or legal equiva | lent live with you at the t | time? |
| | | No | | | |
| | | Yes. In which communit | y state or territory did you | ı live? | Fill in the name and current address of that person. |
| | | | | | |
| | | Name of your spouse, f | ormer spouse, or legal equ | valent | |
| | | Number Street | | | |
| | | City | State | Zip Co | ode |
| | | - , | 2.3.0 | <u> </u> | |
| 3. | In Column | 1, list all of your codel | otors. Do not include you | spouse as a codebtor | if your spouse is filing with you. List the person shown in line 2 |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| | | 20 | oamone | | igo o i c | ,, , , | | |
|---|--|---|-----------------|---------------|--------------|--------------|--|--|
| Fill in this inf | ormation to identify | your case: | | | | | | |
| Debtor 1 | David | | Frazie | r | | | | |
| | First Name | Middle Name | Last N | lame | | Che | eck if this is: | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last N | lame | | . _ | An amended filing | |
| | Bankruptcy Court for | Northern Northern | District of III | inois | | | A supplement showing post-petition chapte expenses as of the following date: | |
| Case number | | | (0 | State) | | | | |
| (If known) | | | | | | | MM / DD / YYYY | |
| Official | Form 106I | | | | | | | |
| Schedu | le I: Your In | come | | | | | 12 | |
| information a spouse. If mo number (if kn | bout your spouse. I | f you are separated an I, attach a separate she y question. | d your spou | se is | not filing v | vith you, do | ur spouse is living with you, include not include information about your tional pages, write your name and cas | |
| - | r employment | | Debtor 1 | l | | | Debtor 2 | |
| | information. | Employment status | ☐ Emplo | Employed | | | Employed | |
| attach a se information | e more than one job, parate page with n about additional | | | mploy | ed | | Not Employed | |
| employers. | - La | | | | | | _ | |
| self-emplo | rt time, seasonal, or yed work. | Employer's name | | | | | | |
| • | n may include student aker, if it applies. | Employer's address | Number St | Number Street | | | Number Street | |
| | | | | | | | | |
| | | | City | | State | Zip Code | City State Zip Code | |
| | | How long employed there? | | | | | | |
| Part 2: Giv | e Details About N | Monthly Income | | | | | | |
| spouse unles If you or your | s you are separated. | e more than one employer | - | | | - | write \$0 in the space. Include your non-filing or that person on the lines below. If you need | |
| | | | | | For De | | For Debtor 2 or non-filing spouse | |
| | | ary, and commissions (before, calculate what the monthly | | 2. | | \$3,484.95 | | |
| 3. Estimat | e and list monthly ove | rtime pay. | | 3. | | + \$0.00 | | |
| 4. Calcula | te gross income. Add l | ine 2 + line 3. | | 4. | | \$3,484.95 | | |

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| Debt | | Frazier | Case number (if | | | | | |
|---|--|---------------------|---------------------|-----------------------------------|-------------------------|--|--|--|
| | First Name Middle Name | Last Name | known) For Debtor 1 | For Debtor 2 or non-filing spouse | | | | |
| Co | py line 4 here | → 4. | \$3,484.95 | | | | | |
| | t all payroll deductions: | | | | | | | |
| 5a | . Tax, Medicare, and Social Security deductions | 5a. | \$773.67 | | | | | |
| 5b | . Mandatory contributions for retirement plans | 5b. | \$0.00 | | | | | |
| 50 | . Voluntary contributions for retirement plans | 5c. | \$0.00 | | | | | |
| 50 | . Required repayments of retirement fund loans | 5d. | \$0.00 | | | | | |
| 5e | . Insurance | 5e. | \$43.33 | | | | | |
| 5f. | Domestic support obligations | 5f. | \$0.00 | | | | | |
| 5g | . Union dues | 5g. | \$0.00 | | | | | |
| 5h | . Other deductions. Specify: | 5h. + | \$53.91 + | | | | | |
| 6. Ad +5h. | d the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5 | f + 5g 6. | \$870.91 | | | | | |
| 7. Ca | Iculate total monthly take-home pay. Subtract line 6 from line | e 4. 7. | \$2,614.04 | | | | | |
| | t all other income regularly received: | | | | | | | |
| 8a | Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing | | | | | | | |
| | gross receipts, ordinary and necessary business expenses, and the total monthly net income. | l 8a. | \$0.00 | | | | | |
| 8b | . Interest and dividends | 8b. | \$0.00 | | | | | |
| 80 | E. Family support payments that you, a non-filing spouse, or dependent regularly receive | a | | | | | | |
| | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$0.00 | | | | | |
| 80 | . Unemployment compensation | 8d. | \$0.00 | | | | | |
| | s. Social Security | 8e. | \$0.00 | | | | | |
| 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: | | \$0.00 | | | | | |
| 80 | Pension or retirement income | 8f. | \$0.00 | | | | | |
| | Other monthly income. Specify: Tax Refund Prorated Month | 8g. lly 8h. + | \$416.66 + | | | | | |
| | d all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g - | F | \$416.66 | | | | | |
| J. Au | d all other module yad mics da r ob r ou r ou r ou r og | | Ψ410.00 | | | | | |
| | alculate monthly income. Add line 7 + line 9. Id the entries in line 10 for Debtor 1 and Debtor 2 or non-filing sp | 10. pouse | \$3,030.70 | = | \$3,030.70 | | | |
| In o | 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. | | | | | | | |
| | pecify: | and are not at | | 11 | + \$0.00 | | | |
| _ | | | | | | | | |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies | | | | | | | | |
| | | | | | Combined monthly income | | | |
| 13. D | o you expect an increase or decrease within the year after No. | you file this form? | , | | | | | |
| | Client's name is not on the lease, but the client's name is not on the lease is not | ent pays rent. | | | | | | |
| Ľ | - | | | | | | | |

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Debtor 1 David Frazier Case number (if First Name Middle Name Last Name Known)

Part 2: Give Details About Monthly Income

Official Form 106l. Additional page.

For Debtor 1 For Debtor 2 or non-filing spouse

5h.Other payroll deductions. Specify:

1. Accident Insurance \$37.40

\$16.51

2. Uniform Cleaning

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| | | Docu | ment Page 37 of 70 | | |
|------------------------------------|--|---|--|-------------------------------------|---|
| Fill in this infor | mation to identify your o | ase: | | | |
| Debtor 1 | David First Name | Middle Name | Frazier Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | Check if this is: An amended filir | ng |
| United States E | Bankruptcy Court for the: | Northern [| District of Illinois | | howing post-petition chapter 13 the following date: |
| Case number (If known) | | | (State) | MM / DD / YYYY | |
| Official | Form 106J | | | | |
| Schedul | e J: Your Exp | enses | | | 12/15 |
| information. If | - | | re filing together, both are equally form. On the top of any additiona | | |
| Part 1: Des | cribe Your Househo | ld | | | |
| 1. Is this a joi | nt case? | | | | |
| ✓ No. Go | to line 2 | | | | |
| Yes. D | oes Debtor 2 live in a se | eparate household? | | | |
| | □No | • | | | |
| | _ | e Official Forms 106J-2, <i>Expen</i> | nses for Separate Household of Debt | or 2. | |
| 2. Do you hav | e dependents? | 0 | | | |
| Do not list D Debtor 2. | | es. Fill out this information for ach dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| expenses o | penses include f people other | 0 | | | |
| than yourself and dependents | | 98 | | | |
| Part 2: Estil | mate Your Ongoing | Monthly Expenses | | | |
| _ | of a date after the bank | | rou are using this form as a supploplemental Schedule J, check the | • | - |
| | - | ash government assistance it on Schedule I: Your Income | - | | Your expenses |
| | or home ownership exor the ground or lot. 4. | penses for your residence. In | clude first mortgage payments and | | \$540.00 |
| If not incl | uded in line 4: | | | | |

\$0.00

\$0.00

\$0.00

\$0.00

4a

4b.

4c.

4d.

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 David Frazier Case number (if known) Last Name

| First Name | Mildule Name Last Name | | |
|--|---|------------|---------------|
| | | | Your expenses |
| 5. Additional mortgage payme | nts for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | | |
| 6a. Electricity, heat, natural ga | as | 6a. | \$325.00 |
| 6b. Water, sewer, garbage co | llection | 6b. | \$0.00 |
| 6c. Telephone, cell phone, In | ternet, satellite, and cable services | 6c. | \$255.00 |
| 6d. Other. Specify: | | 6d | \$0.00 |
| 7. Food and housekeeping sup | pplies | 7. | \$450.00 |
| 8. Childcare and children's ed | ucation costs | 8. | \$0.00 |
| 9. Clothing, laundry, and dry c | leaning | 9. | \$175.00 |
| 10. Personal care products an | d services | 10. | \$175.00 |
| 11. Medical and dental expens | ses | 11. | \$200.00 |
| 12. Transportation. Include gas Do not include car payments | | 12. | \$400.00 |
| 13. Entertainment, clubs, recr | eation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions a | nd religious donations | 14. | \$0.00 |
| 15. Insurance. Do not include insurance ded | ucted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | | 15a | \$0.00 |
| 15b. Health insurance | | 15b | \$0.00 |
| 15c. Vehicle insurance | | 15c | \$60.00 |
| 15d. Other insurance. Specify | <u> </u> | 15d | \$0.00 |
| 16. Taxes. Do not include taxes | deducted from your pay or included in lines 4 or 20. | | |
| Specify: | | 16 | \$0.00 |
| 17. Installment or lease payme | ents: | 10 | |
| 17a. Car payments for Vehicle | | 17a | \$0.00 |
| 17b. Car payments for Vehicle | e 2 | 17b | \$0.00 |
| 17c. Other. Specify: | | 17c | \$0.00 |
| | | 17d | \$0.00 |
| | maintenance, and support that you did not report as deducted from | | \$0.00 |
| | lle I, Your Income (Official Form 106I). | 18. | |
| 19. Other payments you make Specify: | to support others who do not live with you. | 40 | |
| | as not included in lines 4 or 5 of this form or on Cabadula I. Varia Income | 19. | \$0.00 |
| 20. Other real property expens 20a. Mortgages on other pro | es not included in lines 4 or 5 of this form or on Schedule I: Your Income. | 20a | \$0.00 |
| 20b. Real estate taxes. | | 20a 20b | \$0.00 |
| 20c. Property, homeowner's, | or renter's insurance | 200 20c | \$0.00 |
| 20d. Maintenance, repair, and | | 20d | \$0.00 |
| 20e. Homeowner's association | | 20d 20e | \$0.00 |
| | | 206 | <u> </u> |

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| Debtor 1 David | | | Frazier | Case number (if known) | | |
|-----------------|----------------------------|---------------------------|---|------------------------|-----|------------|
| First N | ame | Middle Name | Last Name | | | |
| 21. Other. Spec | cify: | | | | 21 | \$0.00 |
| | | | | | | |
| 22. Calculate | your monthly expense | S. | | | | \$2,580.00 |
| 22a. Add lin | es 4 through 21. | | | | | \$0.00 |
| 22b. Copy I | ine 22 (monthly expens | es for Debtor 2), if any, | from Official Form 106J-2 | | | \$2,580.00 |
| 22c. Add lin | e 22a and 22b. The res | ult is your monthly exp | enses. | | 22. | |
| 23. Calculate y | our monthly net incor | me. | | | | |
| 23a. Copy I | ne 12 (your combined r | monthly income) from S | Schedule I. | | 23a | \$3,030.70 |
| 23b. Copy | our monthly expenses | from line 22 above. | | | 23b | \$2,580.00 |
| | ct your monthly expense | | icome. | | | \$450.70 |
| The re | sult is your monthly net | income. | | | 23c | |
| For examp | le, do you expect to finis | sh paying for your car lo | es within the year after can within the year or do you nodification to the terms of | ou expect your | | |

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| Fill in this information to identify your case: | | | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|--|--|
| Debtor 1 | David | | Frazier | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | | | |
| Case number (If known) | | | (, | | | | | |

Official Form 106Dec

| П | Check if this is an |
|---|---------------------|
| _ | amended filing |

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | | | | | | | | |
|-----|--|---|--|--|--|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | | | |
| | ✓ No | | | | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedules filed with this declaration and | | | | | | | |
| x | /s/ David Frazier | × | | | | | | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | | | | | | |
| | Date 7/28/2017 | Date | | | | | | | |
| | MM/DD/YYYY | MM/DD/YYYY | | | | | | | |

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| Fill in | n this info | ormation to identify your c | ase: | | | | | |
|-----------------|----------------------------------|---|----------------------|----------------------------|-------------------|-------------|----------|-----------------------------------|
| Debt | or 1 | David | | Frazier | | _ | | |
| Debt | or 2 | First Name | Middle N | Name Last Nar | ne | | | |
| | ise, if filing) | First Name | Middle N | Name Last Nar | me | - | | |
| Unite | ed States | Bankruptcy Court for the: | Northern | District of Illin | | _ | | |
| Case (If kno | e number wn) | | | (Sic | ate) | - | | |
| Off | ficial | Form 107 | | | | | | Check if this is a amended filing |
| Sta | teme | ent of Financia | l Affairs f | or Individuals | Filing fo | r Bankru | ıptcy | 04/10 |
| infor | mation. | ete and accurate as po If more space is neede nown). Answer every q | ed, attach a sepa | | | | | |
| Part | 1: Giv | e Details About Your | Marital Status | and Where You Live | d Before | | | |
| 1. | What is | s your current marital st | atus? | | | | | |
| | | arried ot married | | | | | | |
| 2. | During | the last 3 years, have yo | ou lived anywhere | e other than where you l | ive now? | | | |
| | ✓ No | o es. List all of the places yo | ou lived in the last | : 3 years. Do not include | where you live | now. | | |
| | De | ebtor 1: | | Dates Debtor 1 lived there | Debtor 2: | | | Dates Debtor 2 lived there |
| | | | | | Same a | as Debtor 1 | | Same as Debtor 1 |
| | Nu | umber Street | | From | Number St | reet | | From To |
| | Cir | ty State | Zip Code | | City | State | Zip Code | |
| | | | | | Same a | as Debtor 1 | | Same as Debtor 1 |
| | Nu | umber Street | | From | Number St | reet | | From To |
| | Cir | ty State | Zip Code | | City | State | Zip Code | |
| | <i>and territ</i> ☑ No | ne last 8 years, did you e ories include Arizona, Califo . Make sure you fill out S | ornia, Idaho, Louis | iana, Nevada, New Mexico | o, Puerto Rico, T | | | |

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Frazier

Debtor 1 David Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$24440.32 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$44299.00 For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$44000.00 For the calendar year before that: commissions, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

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Frazier Debtor 1 David __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| or 1 | 1 David | | | Fr | azier | Case number | (if known) |
|-------------------|---|---|--|--|---|--|---|
| | First Name | | Middle Name | La | st Name | | |
| nsi orp age | iders include your porations of whic | relatives; and the relatives; are relatives; and the relatives; and the relatives; are relatives; and the relatives; are relatives; and the relatives; and the relatives; are relatives; and the relatives; are relatives; and the relatives; and the relatives; are relatives; are relatives; are relatives; and the relatives; are relatives; are relatives; are relatives; are relatives; and the relatives; are relatives; | any general partner an officer, director, ness you operate a | s; relatives of any person in control | general partners; par , or owner of 20% or | tnerships of which y more of their voting | who was an insider? you are a general partner; g securities; and any managing r domestic support obligations, |
| ✓ | No | | | | | | |
| | Yes. List all pay | ments to | an insider. | Dates of | Total amount | Amountwou | Decemples this navement |
| | | | | payment | paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | _ | | | | |
| | Number Street | | | | | | |
| | - Sileet | | | | | | |
| | City | State | Zip Code | | | | |
| insi | der? ude payments on No | debts gua | aranteed or cosigne | ed by an insider. | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |

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Debtor 1 David Frazier Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Civil Judgment Cook County Circuit Court Pending HZ CNAC, INC. v. Frazier Court Name On appeal 50 West Washington Street Case number NumberStreet Concluded 2016-M1-116408 Illinois 60602 Chicago City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Wages are being garnished \$0 CNAC/MI105 Creditor's Name Explain what happened 3718 STADIUM DR Number Street Property was repossessed. Property was foreclosed. Michigan **KALAMAZOO** 49008 Property was garnished. State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | tor 1 David | Frazier | Case number (if known) | |
|------|---|-----------------------------|--|-----------------------|
| | First Name Middle Name | Last Name | | |
| 11. | Within 90 days before you filed for bankruptcy, did accounts or refuse to make a payment because you | | pank or financial institution, set off any amo | ounts from your |
| | ✓ No Yes. Fill in the details. | | | |
| | | Describe the action th | e creditor took Date action was taken | Amount |
| | Creditor's Name | | | - |
| | Number Street | | | |
| | | Last 4 digits of account | number: XXXX- | |
| | City State Zip Code | | | |
| 12. | Within 1 year before you filed for bankruptcy, was an appointed receiver, a custodian, or another official? | | possession of an assignee for the benefit o | f creditors, a court- |
| | ✓ No ☐ Yes | | | |
| Part | 5: List Certain Gifts and Contributions | | | |
| 13. | Within 2 years before you filed for bankruptcy, did y | you give any gifts with a t | otal value of more than \$600 per person? | |
| | ✓ No | , , | | |
| | Yes. Fill in the details for each gift. | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | | | |
| | Person to Whom You Gave the Gift | | | |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |
| | Person to Whom You Gave the Gift | | | |
| | | | | |
| | Number Street | | | |
| | City State Zip Code Person's relationship to you | | | |
| | I GISOTI S IGIALIOTISHIP LO YOU | | | |

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| btor 1 | David | Frazier | Case number (if know | vn) | |
|--------|--|--|------------------------------|-----------------------------------|------------------------|
| | First Name Middle Name | Last Name | · | · | |
| | | | | | |
| . Wi | thin 2 years before you filed for bankrupto | cy, did you give any gifts or contribu | tions with a total value | of more than \$600 | to any charity? |
| | 1 No | | | | |
| ✓ | No | | | | |
| | Yes. Fill in the details for each gift or con | tribution. | | | |
| | Gifts or contributions to charities | Describe what you contri | hutad | Date you | Value |
| | that total more than \$600 | Describe what you contin | buteu | contributed | Value |
| | that total more than 4000 | | | Continuated | |
| | | | | | |
| | Charity's Name | | | | |
| | | | | | |
| | | | | | |
| | Number Street | | | | |
| | Number Succe | | | | |
| | City State Zip Cod | <u> </u> | | | |
| | Oity State Zip Cou | | | | |
| c. | List Certain Losses | | | | |
| . 0. | 2101 0 01 tanii 200000 | | | | |
| | No Yes. Fill in the details. Describe the property you lost and how the loss occurred | Describe any insurance of Include the amount that ins | surance has paid. List | Date of your loss | Value of property lost |
| | | pending insurance claims of | n line 33 of <i>Schedule</i> | | |
| | | A/B: Property. | | | |
| | | | | | |
| | | | | | |
| | | | | | - |
| . Wit | List Certain Payments or Transfers thin 1 year before you filed for bankruptcy out seeking bankruptcy or preparing a ba | r, did you or anyone else acting on y nkruptcy petition? | | | anyone you consulte |
| . Wit | thin 1 year before you filed for bankruptcy out seeking bankruptcy or preparing a ban clude any attorneys, bankruptcy petition prepa | r, did you or anyone else acting on y nkruptcy petition? | | | anyone you consulte |
| . Wit | thin 1 year before you filed for bankruptcy out seeking bankruptcy or preparing a bandlude any attorneys, bankruptcy petition prepare | r, did you or anyone else acting on y nkruptcy petition? | | | anyone you consulte |
| Wit | thin 1 year before you filed for bankruptcy out seeking bankruptcy or preparing a ban clude any attorneys, bankruptcy petition prepa | r, did you or anyone else acting on y nkruptcy petition? | services required in your b | Date payment or transfer | Amount of payment |
| Wit | thin 1 year before you filed for bankruptcy out seeking bankruptcy or preparing a ban lude any attorneys, bankruptcy petition prepa No Yes. Fill in the details. | n, did you or anyone else acting on y nkruptcy petition? arers, or credit counseling agencies for some period of the counseling agencies for some period and value of a transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for bankruptcy out seeking bankruptcy or preparing a banklude any attorneys, bankruptcy petition preparation No Yes. Fill in the details. Semrad Law Firm | r, did you or anyone else acting on y nkruptcy petition? arers, or credit counseling agencies for some of a percentage of a pe | services required in your b | Date payment or transfer | Amount of |
| Wit | thin 1 year before you filed for bankruptcy out seeking bankruptcy or preparing a banklude any attorneys, bankruptcy petition preparation No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | n, did you or anyone else acting on y nkruptcy petition? arers, or credit counseling agencies for some period of the counseling agencies for some period and value of a transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for bankruptcy out seeking bankruptcy or preparing a ballude any attorneys, bankruptcy petition preparation p | n, did you or anyone else acting on y nkruptcy petition? arers, or credit counseling agencies for some period of the counseling agencies for some period and value of a transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for bankruptcy out seeking bankruptcy or preparing a banklude any attorneys, bankruptcy petition preparation No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | n, did you or anyone else acting on y nkruptcy petition? arers, or credit counseling agencies for some period of the counseling agencies for some period and value of a transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for bankruptcy out seeking bankruptcy or preparing a ballude any attorneys, bankruptcy petition preparation p | n, did you or anyone else acting on y nkruptcy petition? arers, or credit counseling agencies for some period of the counseling agencies for some period and value of a transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for bankruptcy out seeking bankruptcy or preparing a ballude any attorneys, bankruptcy petition preparation of the properties o | n, did you or anyone else acting on y nkruptcy petition? arers, or credit counseling agencies for some period of the counseling agencies for some period and value of a transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for bankruptcy out seeking bankruptcy or preparing a ballude any attorneys, bankruptcy petition preparation of the properties o | n, did you or anyone else acting on y nkruptcy petition? arers, or credit counseling agencies for some control of transferred Attorney's Fee - 350.00 | services required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for bankruptcy out seeking bankruptcy or preparing a ballude any attorneys, bankruptcy petition preparation of the properties o | n, did you or anyone else acting on y nkruptcy petition? arers, or credit counseling agencies for some control of transferred Attorney's Fee - 350.00 | services required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for bankruptcy out seeking bankruptcy or preparing a balled any attorneys, bankruptcy petition prepared No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod | n, did you or anyone else acting on y nkruptcy petition? arers, or credit counseling agencies for some control of transferred Attorney's Fee - 350.00 | services required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for bankruptcy out seeking bankruptcy or preparing a ballude any attorneys, bankruptcy petition preparation of the properties o | n, did you or anyone else acting on y nkruptcy petition? arers, or credit counseling agencies for some control of transferred Attorney's Fee - 350.00 | services required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for bankruptcy out seeking bankruptcy or preparing a ballude any attorneys, bankruptcy petition prepared No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod Email or website address | p, did you or anyone else acting on y nkruptcy petition? arers, or credit counseling agencies for secretary and value of a transferred Attorney's Fee - 350.00 | services required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for bankruptcy out seeking bankruptcy or preparing a balled any attorneys, bankruptcy petition prepared No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod | p, did you or anyone else acting on y nkruptcy petition? arers, or credit counseling agencies for secretary and value of a transferred Attorney's Fee - 350.00 | services required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for bankruptcy out seeking bankruptcy or preparing a ballude any attorneys, bankruptcy petition prepared No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod Email or website address | p, did you or anyone else acting on y nkruptcy petition? arers, or credit counseling agencies for secretary and value of a transferred Attorney's Fee - 350.00 | services required in your b | Date payment or transfer was made | Amount of payment |
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| . Wit | thin 1 year before you filed for bankruptcy out seeking bankruptcy or preparing a bale lude any attorneys, bankruptcy petition prepared No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street City State Zip Cod | price of the color | services required in your b | Date payment or transfer was made | Amount of payment |

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| ebtor 1 | | | Frazier | Case number (if know | n) | |
|----------|---|---------------------------|--|------------------------------|---|------------------------------|
| | First Name | Middle Name | Last Name | | | |
| hel | thin 1 year before you file p you deal with your cre not include any payment | ditors or to make paym | | our behalf pay or transfe | er any property to a | nyone who promised to |
| ✓ | No Yes. Fill in the details. | | | | | |
| | | | Description and value of a transferred | ny property | Date payment or transfer was made | Amount of payment |
| | Person Who Was Paid | | | | | |
| | Number Street | | | | | |
| | City State | e Zip Code | | | | |
| Inc | ordinary course of your lude both outright transfer transfers that you have all No Yes. Fill in the details. | s and transfers made as s | security (such as the granting of | a security interest or mortg | age on your propert | y). Do not include gifts |
| | | | Description and value of p transferred | | ny property or eceived or debts p e | Date transfer was made |
| | Person Who Received Tr | ransfer | | | | |
| | Number Street | | | | | |
| | City State Person's relationship to | • | | | | |
| | Person Who Received Tr | ransfer | | | | |
| | Number Street | | | | | |
| | City State Person's relationship to | • | | | | |
| ber | chin 10 years before you neficiary? ese are often called asset- | | d you transfer any property to | a self-settled trust or si | milar device of whic | ch you are a |
| ✓ | No Yes. Fill in the details. | | | | | |
| | . 33. I iii ii ii ii detaiis. | | Description and value of | the property transferred | i | Date transfer was made |
| | Name of trust | | | | | |

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Debtor 1 David Frazier Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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Frazier Debtor 1 David Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Deb | tor 1 | | | | Frazier | Case num | nber (if known) | |
|------|----------|----------------------------|-----------------------------------|--------------------|--|------------------------|---|--------------------|
| | | First Name | | Middle Name | Last Name | | | |
| 26. | | e you been a party | y in any judio | cial or administr | ative proceeding under | any environmental la | w? Include settlements and orde | rs. |
| | Ħ | Yes. Fill in the det | tails. | | | | | |
| | Н | | | | Court or agency | Na | ture of the case | Status of the case |
| | | Case title | | | | | | Pending |
| | | | | | Court Name | | | On appeal |
| | | Case number | | | NumberStreet | | | Concluded |
| | | 1 | | | City State | Zip Code | | _ |
| Part | 11: | Give Details Ab | oout Your E | Business or Co | onnections to Any Bu | ısiness | | |
| 27. | With | nin 4 years before | you filed for | bankruptcy, did | l you own a business or | have any of the follow | ving connections to any business? | ? |
| | | A member of A partner in a | f a limited liab a partnership | oility company (L | ade, profession, or othe LC) or limited liability pa re of a corporation | | ne or part-time | |
| | | An owner of | at least 5% c | of the voting or e | quity securities of a cor | poration | | |
| | | _ | | · · | | F | | |
| | ✓ | No. None of the a | | | | | | |
| | | Yes. Check all that | at apply abo | ve and fill in the | details below for each b | ousiness. | | |
| | | | | | Describe the nate | ure of the business | Employer Identification nu include Social Security nu | |
| | | Business Name | | | _ | | EIN: | |
| | | Number Street | | | Nome of account | ant au baakkaanau | Dates business existed | |
| | | City | State | Zip Code | — Name of account | ant or bookkeeper | From To | |
| | | | | | | | | |
| | | | | | Describe the nati | ure of the business | Employer Identification nu include Social Security nu | |
| | | Business Name | | | _ | | EIN: | |
| | | Number Street | | | Nome of consumt | ant or bookkooner | Dates business existed | |
| | | City | State | Zip Code | — Name of account | ant or bookkeeper | _ | |
| | | Oity | State | Zip Gode | | | From To | |
| | | | | | Describe the nati | ure of the business | Employer Identification nu include Social Security nu | |
| | | Business Name | | | - | | EIN: | |
| | | Number Street | | | Name of account | ant or bookkeeper | Dates business existed | |
| | | City | State | Zip Code | _ | | From To | |
| | | | | | | | | |

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| Deb | otor 1 David | | Frazier | Case number (if known) |
|-------|---|------------------|------------------------------|--|
| | First Name Midd | le Name | Last Name | |
| 28. | Within 2 years before you filed for bank creditors, or other parties. No Yes. Fill in the details below. | kruptcy, did you | give a financial statement t | o anyone about your business? Include all financial institutions, |
| | | | Date issued | |
| | | | Date Issued | |
| | Name | | MM/DD/YYYY | |
| | Number Street | | | |
| | City State | Zip Code | | |
| Part | t 12: Sign Below | | | |
| | a bankruptcy case can result in fines up | | | or obtaining money or property by fraud in connection with rears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | /s/ David Frazier Signature of Debtor 1 | | | Signature of Debtor 2 |
| | olginatare et 2 ester i | | | Date |
| | Date 7/28/2017 | | | Bale |
|] | Did you attach additional pages to Your No Yes Did you pay or agree to pay someone wh | | | s Filing for Bankruptcy (Official Form 107)? cruptcy forms? |
| r | .✓ No | | | |
| L | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Northern Dis | trict of Illinois | | |
|-----------|--|--------------------------------------|--|-----------------------|------------------|
| In re | David Frazier | | Case No |) | |
| | Debtor | | | (If k | nown) |
| | | | Chapter | Char | oter 13 |
| D | ISCLOSURE OF | COMPENSATI | ON OF ATTORNI | EY FOR DE | BTOR |
| compe | ensation paid to me within one | e year before the filing of the | ertify that I am the attorney for he petition in bankruptcy, or a nplation of or in connection w | greed to be paid to r | ne, for services |
| For le | gal services, I have agreed to a | ccept | | | \$4,000.00 |
| Prior t | o the filing of this statement I | have received | | | \$350.00 |
| Baland | ce Due | | | | \$3,650.00 |
| 2. The so | ource of the compensation pai | d to me was: | | | |
| | ✓ Debtor | Other (speci | fy) | | |
| 3. The so | ource of the compensation pai | d to me is: | | | |
| | ✓ Debtor | Other (speci | fy) | | |
| 4. 🚺 I h | nave not agreed to share the a embers and associates of my | oove-disclosed compensa law firm. | tion with any other person un | less they are | |
| Шm | | w firm. A copy of the agree | with a other person or person ement, together with a list of the | | |
| | | - | egal service for all aspects of ting advice to the debtor in det | • • | _ |
| b. | Preparation and filing of any | petition, schedules, state | ments of affairs and plan whic | h may be required; | |
| C. | Representation of the debto | at the meeting of creditor | rs and confirmation hearing, a | nd any adjourned he | arings thereof; |
| d. | Representation of the debto | in adversary proceedings | and other contested bankrup | tcy matters; | |
| 6. By agr | reement with the debtor(s), the | above-disclosed fee does | s not include the following ser | vices: | |
| | | | | | |
| | | CERTIF | FICATION | | |
| | that the foregoing is a comple this bankruptcy proceedings. | te statement of any agreer | ment or arrangement for paym | ent to me for represe | entation of the |
| | 7/28/2017 | | /s/ Brian Atlas | | |
| | Date | | Signature of Attorne | у | |
| | | | Semrad Law Firm | | |
| | | | Name of law firm | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Frazier, David | Case No | |
|-----------------|---|--|-------------------------------------|
| | Debtor(s) | | |
| | | Chapter. | Chapter13 |
| | VERIFICA | TION OF CREDITOR MAT | RIX |
| Ti knowledge | he above named Debtors hereby verify the. | nat the attached list of creditors is tr | ue and correct to the best of their |
| Date: | 7/28/2017 | /s/ Frazier, David Frazier, David | |
| | | Signature of Deb | tor |

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CNAC/MI105 3718 STADIUM DR KALAMAZOO, MI, 49008

Walinski & Associates P.C. 2215 Enterprise Dr Westchester, IL, 60154

AD ASTRA RECOVERY SERV 7330 W 33RD ST N STE 118 WICHITA, KS, 67205

DIVERSIFIED Po Box 1391 Southgate, MI, 48195

STELLAR RECOVERY INC PO Box 1119 Charlotte, NC, 28201

ARS ACCOUNT RESOLUTION 1643 HARRISON PKWY STE 1 SUNRISE, FL, 33323

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256

I C SYSTEM INC PO BOX 64378 SAINT PAUL, MN, 55164

NATIONWIDE CREDIT & CO 815 COMMERCE DR STE 270 OAK BROOK, IL, 60523

CONSUMER FINANCIAL SVC 509 Green Bay Road Waukegan, IL, 60085

CCI 501 Greene Street # 302 Augusta, GA, 30901 STANISCCONTR 914 14TH ST POB 480 MODESTO, CA, 95353

MED BUSI BUR 1460 RENAISSANCE D SUITE 400 PARK RIDGE, IL, 60068

PLS Financial Solutions 1 S Wacker Dr Ste 3600 Chicago, IL, 60606

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago, IL, 60602

HARRIS & HARRIS LTD 222 Merchandise Mart Plaza, Suite 1900 Chicago, IL, 60654

Illinois Secretary of State 2701 S Dirksen Pkwy Springfield, IL, 62723

Rush Oak Park Hospital 26099 Network Pl Chicago, IL, 60673

Illinois Tollway PO Box 5544 Chicago, IL, 60680

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.



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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.



D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.



F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 7/19/2017 | | |
|------------------------------|-----------|------------------|--------|
| Signed: | 0 1/ | | |
| /s/ David Frazier Land Trysh | | | |
| | <i>V</i> | /s/ Brian Atlas | |
| Debtor(s) |) | Attorney for Deb | tor(s) |

Do not sign if the fee amounts at top of this page are blank.

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| Debtor 1 David First Name | Middle Name | Frazier Last Name | Case number (if known) | |
|--|---|--|--|--|
| | uestions for Reporting Purpose | | | - |
| 16. What kind of debts do you have? | 40 | y consumer debts? Cal primarily for a perso y business debts? Bu investment or through | nal, family, or househol siness debts are debts in the operation of the be | d purpose." that you incurred to obtain usiness or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | No. | r 7. Do you estimate that | t after any exempt proper o distribute to unsecured o | ty is excluded and administrative creditors? |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49☐ 50-99☐ 100-199☐ 200-999 | 1,000-5,00 5,001-10,0 10,001-25, | oo j | 25,001-50,000 50,001-100,000 More than 100,000 |
| ^{19.} How much do you estimate your assets to be worth? | | \$10,000,00 \$50,000,00 | -\$10 million [1-\$50 million [1-\$100 million [01-\$500 million [| \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? Part 7: Sign Below | ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$10,000,00 \$50,000,00 | -\$10 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| | I have examined this petition, ar | ad I declare under pop | olty of porjuny that the i | oformasking and its life is |
| I have examined this petition, and I declare under penalty of perjury that the information provided is t correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11 of title 11, United States Code. I understand the relief available under each chapter, and I choose to punder Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help | | | | ble, under Chapter 7, 11,12, or 13 napter, and I choose to proceed |
| | out this document, I have obtain | ned and read the notic | e required by 11 U.S.C. | § 342(b). |
| | I request relief in accordance wit I understand making a false state connection with a bankruptcy caboth. 18 U.S.C. §§ 152, 1341, 1 | ement, concealing pro ase can result in fines | perty, or obtaining mor | nev or property by fraud in |
| | Signature of Debtor 1 | 4 | Signature of Debto | r 2 |
| | Executed on 7/19/2017 MM / DD | | Executed on | MM / DD / YYYY |

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| Debtor 1 | David | | Frazier |
|--------------------|---------------------------|-------------|----------------------|
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| Spouse, if filing) | First Name | Middle Name | Last Name |
| Jnited States E | Bankruptcy Court for the: | Northern | District of Illinois |
| Case number | -w. | | (State) |

Check if this is an amended filing

claration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Pai | Part 1: Sign Below | | | | |
|--|--|---|--|--|--|
| The second secon | Did you pay or agree to pay someone who is NOT an attorney to | help you fill out bankruptcy forms? | | | |
| The state of the s | ☑ No | | , | | |
| And and an analysis of the state of the stat | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | |
| A 100 | | | White is a preservery sharmon | | |
| | | | AND THE TAXABLE PROPERTY. | | |
| | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and | demonstration in the signal group of the | | |
| × | /s/ David Frazier Land Thy | x | and decorated and a sur- | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | i ANTANA MARKAMANA | | |
| | Date 7/19/2017 MM/DD/YYYY | Date MM/DD/YYYY | NAME OF STREET | | |

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| Debtor 1 David | | Frazier | Case number (if known) |
|---|---------------------------------|----------------------------|--|
| First Name | Middle Name | Last Name | |
| 28. Within 2 years before creditors, or other party. No Yes. Fill in the det | | ou give a financial stater | nent to anyone about your business? Include all financial institutions |
| hl | | Date to | |
| • | • | Date issued | |
| Name | | MM/DD/YYYY | _ |
| Number Street | | · | |
| rumber 300ect | | | |
| City | State Zip Code | | |
| Part 12: Sign Below | | | |
| a bankruptcy case can r | esult in fines up to \$250,000, | | nents, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| Signatui | re of Debtor 1 | | Signature of Debtor 2 |
| Date 7/ | 19/2017 | , | Date |
| ✓ No Yes Did you pay or agree to p ✓ No | I pages to Your Statement of | | duals Filing for Bankruptcy (Official Form 107)? |
| Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Frazier, David | Case No | Case No | | |
|-----------------|--|--|--------------------------------------|--|--|
| Debtor(s) | | 0.000 110. | | | |
| | | Chapter. | Chapter13 | | |
| | VERIFI | CATION OF CREDITOR MAT | ΓRIX | | |
| Th knowledge | ne above named Debtors hereby veri e. | fy that the attached list of creditors is tr | rue and correct to the best of their | | |
| Date: | 7/19/2017 | /s/ Frazier, David | · Dand Fry i | | |
| | | Frazier, David <i>Signature of De</i> L | ${\cal V}$ | | |

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| Deb | tor 1 David | | Frazier | Case number (if known) | | | | |
|----------------|---|--|--|---|--|--|--|--|
| | | Middle Name | Last Name | | | | | |
| 16. | | amily income that applies to | you. Follow these steps: | emmonates and processors of the secretary to the secretary and the second section of the section of the second section of the section of the second section of the section of the second section of the | Vide in the second second control of the second | | | |
| 71 | 16a. Fill in the state in wh | nich you live. | Illinois | | | | | |
| Market Comment | 16b. Fill in the number of | f people in your household. | 1 | | | | | |
| | 16c. Fill in the median far | mily income for your state and s | | | \$50,765.00 | | | |
| | household using the link specif | ied in the separate instructions f | To find a | a list of applicable median income amounts, go online | | | | |
| 17. | using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. '. How do the lines compare? | | | | | | | |
| | 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). | | | | | | | |
| | 0.0.0. 9 1020[1 | re than line 16c. On the top of p b)(3). Go to Part 3 and fill out r current monthly income from li | Calculation of Disposal | box 2, Disposable income is determined under 11 ple Income (Official Form 122C-2). On line 39 of that | | | | |
| | | mmitment Period Under | | 1) | | | | |
| | | monthly income from line 11 | | | \$3,800.96 | | | |
| 19. | Deduct the marital adju commitment period under | stment if it applies. If you are a 11 U.S.C. § 1325(b)(4) allows | married, your spouse is n you to deduct part of you | not filing with you, and you contend that calculating the ur spouse's income, copy the amount from line 13. | | | | |
| | 19a. If the marital adjustm | ent does not apply, fill in 0 on li | ne 19a. | | -\$0.00 | | | |
| | 19b. Subtract line 19a fr | om line 18. | | | \$3,800.96 | | | |
| 20. | Calculate your current n | nonthly income for the year. F | ollow these steps: | | 40,000.50 | | | |
| | 20a. Copy line 19b. | | | | \$3,800.96 | | | |
| | Multiply by 12 (the n | umber of months in a year). | eren in the amount of the second of the second | | x 12 | | | |
| | 20b. The result is your cur | rent monthly income for the yea | r for this part of the form. | | \$45,611.52 | | | |
| | 20c. Copy the median fam | nily income for your state and siz | e of household from line | 16c. | \$50,765.00 | | | |
| 21. | How do the lines compar | | | | | | | |
| | Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. | | | | | | | |
| | Line 20b is more than 4, <i>The commitment pe</i> | or equal to line 20c. Unless other of the control o | erwise ordered by the cou | urt, on the top of page 1 of this form, check box | | | | |
| Part 4 | - | and by substitution at the target. | | | | | | |
| | | | | | | | | |
| | By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. | | | | | | | |
| | | | 4 | | | | | |
| | /s/ David Frazie | or drawed fragla | × | | | | | |
| | Signature of Debto | r1 | Sigr | nature of Debtor 2 | MAP I FE BLACK | | | |
| | Date 7/19/2017 | / | Date | | 1 12 1 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 | | | |
| | MM/DD/YYY | $ar{\gamma}$ | Dan | MM/DD/YYYY | 5 7 | | | |
| _ | If you checked 17a. do | NOT fill out or file Form 122C-2 | • | | eran roomen. | | | |
| | If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above. | | | | | | | |
| | above. | | | | | | | |